

**SCHEDULE A (FEC Form 3 )  
ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 10 / 76

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 11d  
☐ 12 ☐ 13a ☐ 13b ☐ 14 ☐ 15

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

Jeff Fortenberry for United States Congress

**A.**

Full Name (Last, First, Middle Initial)

Gateway Executive Management

Mailing Address 770 N Cotner Ste 406

City

Lincoln

State

NE

Zip Code

68505

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Receipt For: 2010

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 0 / 2 8 / 2 0 0 9

Transaction ID: SA11Ai-CN8915

Amount of Each Receipt this Period

250.00

**B.**

Full Name (Last, First, Middle Initial)

Ms. Kimberly Marsh

Mailing Address 5300 New Castle Rd

City

Lincoln

State

NE

Zip Code

68516

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Gateway Executive MgtOccupation  
Realtor

Receipt For: 2010

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

298.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 0 / 2 8 / 2 0 0 9

Transaction ID: SA11Ai-CN8916

Amount of Each Receipt this Period

250.00

Partnership-Gateway Execu-  
tive Manageme**[MEMO ITEM]**\$250.00 MEMO Partnership  
Attributed**C.**

Full Name (Last, First, Middle Initial)

Dr. Andrew Abela

Mailing Address 1114 Riva Ridge Dr

City

Great Falls

State

VA

Zip Code

22066

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Catholic UniversityOccupation  
Professor

Receipt For: 2010

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 2 / 1 8 / 2 0 0 9

Transaction ID: SA11Ai-CN9048

Amount of Each Receipt this Period

500.00

**SUBTOTAL** of Receipts This Page (optional) .....

750.00

**TOTAL** This Period (last page this line number only) .....